REPLY UNDER 37 C.F.R. 1.116 – EXPEDITED PROCEDURE **TECHNOLOGY CENTER 2836**



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

: 2836

Customer No.: 26794

Examiner

: Daniel J. Cavallari

Serial No.

: 10/621,147

Filed

: July 16, 2003

Inventors

: Robert Ian Gresham

Docket No.: 18065

[TYC-03-1199]

Confirmation No.: 1214

Title

: RADIOFREQUENCY DOUBLE POLE

: SINGLE THROW SWITCH

Dated: January 25, 2007

Mail Stop AF

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Certificate of Mailing Under 37 CFR 2.197

For

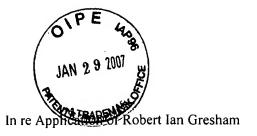
Postcards (2) Amendment Transmittal Letter, in duplicate Reply Under 37 C.F.R. 1.116

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date appearing below.

> Name of Applicant, Assignee, Applicant's Attorney or Registered Representative:

> > DLA Piper US LLP One Liberty Place, Suite 4900 1650 Market Street Philadelphia, PA 19103

By:	Maney Hines	
Date:	1/25/07	



Attorney Docket No.: 18065

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Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- _ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
- A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
- x No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)

(Col. 2) (Col. 3)

SMALL ENTITY

OTHER THAN SMALL ENTITY

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PRE- VIOUSLY PAID FOR	PRESENT EXTRA	
TOTAL	* 9	T -	** 20=	0	
INDEP.	* 3] -	** 3=	0	
Application Size Fee					
First Presentation of Multiple Dependent Claim					

	ADD'L	
RATE	FEE	0
x 25 =	\$	
X 100 =	\$	
	\$	
+180=	\$	

	ADD'L
RATE	FEE
x50 =	\$ 0
x 200 =	\$ 0
x250=	\$ 0
+360=	\$ 0

TOTAL ADDITIONAL FEE

OR

\$ <u>0</u>

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-2719 in the amount of \$_____.

 A duplicate copy of this sheet is enclosed.

 A check in the amount of \$_____ is attached.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.
 - \underline{x} Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
 - Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted.

Paul A. Taufer Reg. No. 35,703 Richard L. Cruz Reg. No. 52,783

Attorney for Applicant

PAT/RLC/nn (215)656-3385

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Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Official Action dated November 16, 2006, please amend the Application as follows: